

UNITED STATES COURT OF APPEALS
FOR THE SIXTH CIRCUIT

Appearance of Counsel

Appeal No.: _____

Case Title: _____ vs. _____

List all clients you represent in this appeal:

[illegible]☐ Appellant☐ Petitioner

☐ Amicus Curiae

☐ Criminal Justice Act☐ Appellee☐ Respondent

☐ Intervenor

(Appointed)

☐ Check if a party is represented by more than one attorney.

☐ Check if you are lead counsel.

If you are substituting for another counsel, include that attorney's name here:

By filing this form, I certify my admission and/or eligibility to file in this court.

Attorney Name: _____ Signature: s/_____

Firm Name: _____

Business Address:

City/State/Zip: _____

Telephone Number (Area Code): _____

Email Address: _____

Please ensure your contact information above matches your PACER contact information. If necessary, update your PACER account.

CERTIFICATE OF SERVICE

The electronic signature above certifies that all parties or their counsel of record have been electronically served with this document as of the date of filing.